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** CONTINUING DATA *****

This application is a DIV of 10/115,123 04/04/2002 PAT 6,774,216
 which is a DIV of 09/461,325 12/14/1999 PAT 6,475,753
 which is a CIP of PCT/US99/13418 06/15/1999
 which claims benefit of 60/089,507 06/16/1998
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 and claims benefit of 60/089,510 06/16/1998
 and claims benefit of 60/090,112 06/22/1998
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** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/21/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MD	SHEETS DRAWING 0	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

22428

TITLE

94 human secreted proteins

<p>FILING FEE RECEIVED 964</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"> <tr> <td><input type="checkbox"/></td> <td>All Fees</td> </tr> <tr> <td><input type="checkbox"/></td> <td>1.16 Fees (Filing)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>1.17 Fees (Processing Ext. of time)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>1.18 Fees (Issue)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Credit</td> </tr> </table>	<input type="checkbox"/>	All Fees	<input type="checkbox"/>	1.16 Fees (Filing)	<input type="checkbox"/>	1.17 Fees (Processing Ext. of time)	<input type="checkbox"/>	1.18 Fees (Issue)	<input type="checkbox"/>	Other _____	<input type="checkbox"/>	Credit
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